PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003					Application or Docket Number					
OLANICAC FILED DADTI						YTITY	<u> </u>	OTHER	THAN	
(Column 1)		(Column 2)			TYPE -		OR	OR SMALL ENTITY		
TOTAL CLAIMS	18			1	RATE	FEE		RATE	FEE	
FOR	NUMBER FILED	NUMBE	R EXTRA	j	BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS	/ K minus 20=	. 0	0		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS	2 minus 3 =	0			X42=		OR	X84≃		
MULTIPLE DEPENDENT CLAIM PRESENT				+140=		OR	+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2			olumn 2	ı	TOTAL	375	OR	TOTAL		
CLAIMS AS AMENDED - PART II					CHALL	ENTITY	0 0	OTHER SMALL		
4/3/06 (Column 1)		mn 2) ((Column 3)	1	SMALL	ADDI-	OK I I	SMALL	ADDI-	
	NUA	IBER OUSLY	PRESENT EXTRA		RATE	TIONAL	i	RATE	TIONAL	
AMENDMENT		FOR	/- -			FEE		X\$18=	FEE	
REMAINING AFTER AMENDMENT Tôtal • /5	Minus •• 2	3	- /		X\$ 9=	 	OR	-	├	
FIRST PRESENTATION OF N	ULTIPLE DEPENDENT CLAIM				X42=	ļ <i>ļ</i>	OR	X84=	1	
					+140=	11	OR	+280=		
10/27/06				•	YOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
(Column 1)			(Column 3)			T	_			
CLAIMS REMAINING	NUN	HEST ABER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
AFTER AMENDMENT		FOR	EXTRA		TVALE	FEE /		MAIL	FEE	
REMAINING AFTER AMENOMENT Total Independent Total Total Total Total Total Total Total Total	Minus **	20	•		X\$ 9=		OR	X\$18=		
Independent • 2	Minus	Z AIM	=		X42=		OR	X84=		
THO PRESENTATION OF IT		1 00 1		,	+140=		OR	+280=		
			1	•	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FÆE		
(Column 1)	(Colu	mn 2)	(Column 3)			<u></u>				
CLAIMS		HEST ABER	PRESENT			ADDI-			ADDI-	
AFTER AMENDMENT		OUSLY FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
REMAINING AFTER AMENDMENT Total Independent Total	Minus **		•		X\$ 9=		OR	X\$18=		
Independent *	Minus ***] [X42≈		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]]		 				
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 					+140=		OR	+280=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							OR	TOTAL ADDIT, FEE		
The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.										
FORM PTO-675 (Rev. 12/02) 14.5. Government Printing Office: 2003 — 459-27889151 Patient and Tradamant Office, U.S. DEPARTMENT OF COMMERCE										